

**FEC
FORM 3**

REPORT OF RECEIPTS AND DISBURSEMENTS

For An Authorized Committee

 SECRETARY OF THE SENATE
 14 APR 17 PM 2:57

Office Use Only

1. NAME OF COMMITTEE (in full) **TYPE OR PRINT ▼** Example: If typing, type over the lines.

12FE4M5

FRIENDS OF STEVEN WELCH

ADDRESS (number and street)

10 GREAT WOODS LANE


 Check if different
than previously
reported. (ACC)

MALVERN

PA

19355

2. **FEC IDENTIFICATION NUMBER ▼**

C C00463653

CITY ▲

STATE ▲

ZIP CODE ▲

STATE ▼ DISTRICT

 3. IS THIS
REPORT

 NEW
(N)

OR

☐ AMENDED
(A)

PA

4. **TYPE OF REPORT** (Choose One)

(a) Quarterly Reports:



April 15 Quarterly Report (Q1)



July 15 Quarterly Report (Q2)



October 15 Quarterly Report (Q3)



January 31 Year-End Report (YE)



Termination Report (TER)

- (b) 12-Day **PRE**-Election Report for the:



Primary (12P)



General (12G)



Runoff (12R)



Convention (12C)



Special (12S)

Election on

M M / D D / Y Y Y Y Y

in the
State of

- (c) 30-Day **POST**-Election Report for the:



General (30G)



Runoff (30R)



Special (30S)

Election on

M M / D D / Y Y Y Y Y

in the
State of

5. Covering Period

 M M / D D / Y Y Y Y Y
 01 / 01 / 2014

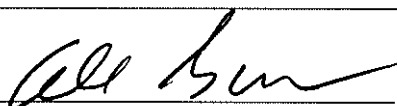
through

 M M / D D / Y Y Y Y Y
 03 / 31 / 2014

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer ALEX BARNA

Signature of Treasurer ALEX BARNA



Date

 M M / D D / Y Y Y Y Y
 04 / 15 / 2014

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

 Office
Use
Only

FEC FORM 3
 (Revised 02/2003)